



COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

In re application of: Benjamin Oshlack, et al.
Serial No.: 10/689,866
Filed: October 21, 2003
For: TAMPER-RESISTANT ORAL OPIOID AGONIST FORMULATIONS

Sir:

Transmitted herewith is a **Supplemental Information Disclosure Statement** in the above-identified application.

- ☐ Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
☐ Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
☐ No fee for additional claims is required.
☐ A filing fee for additional claims calculated as shown below, is required:

(Col. 1)		(Col. 2)	SMALL ENTITY		OR	LARGE ENTITY	
FOR:	REMAINING	HIGHEST	RATE	FEE		RATE	FEE
	AFTER	PREVIOUSLY	PRESENT				
	AMENDMENT	PAID FOR	EXTRA				
TOTAL CLAIMS	Minus 20	=	x \$	9		x \$	18
INDEP. CLAIMS	Minus 3	=	x \$	43		x \$	86
[1] FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+	\$145		+	\$290

TOTAL: \$ OR TOTAL:

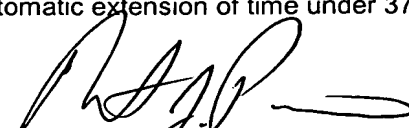
- * If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☒ Also transmitted herewith are:
☐ Petition for extension under 37 C.F.R. 1.136
☒ Other: PTO form 1449 (1 page) with attached references.

- ☐ Check(s) in the amount of \$.00 is/are attached to cover:
☐ Filing fee for additional claims under 37 C.F.R. 1.16
☐ Petition fee for one month extension under 37 C.F.R. 1.136
☐ Other: Late oath or declaration fee

- ☒ The Assistant Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.

- ☒ Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
☒ Any patent application processing fees under 37 C.F.R. 1.17.
☒ Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.

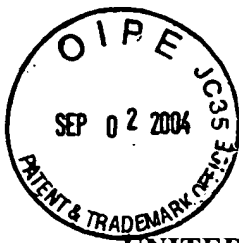

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I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with the United States Postal Service as "first class mail" in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" on August 30, 2004.

DAVIDSON, DAVIDSON & KAPPEL, LLC

BY:


 Elizabeth Pietrowski



200.1133CON

UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: To be assigned Art Unit: 1614
Re: Application of: Benjamin OSHLACK, et al.
 Serial No.: 10/689,866
 Filed: October 21, 2003
 For: **TAMPER RESISTANT ORAL OPIOID AGONIST
 FORMULATIONS**

SUPPLEMENTAL INFORMATION DISCLOSURE
STATEMENT UNDER 37 C.F.R. § 1.56

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

August 30, 2004

Sir:

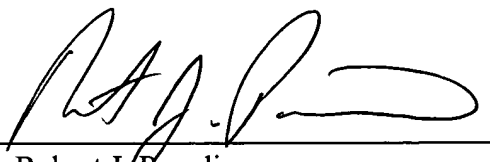
In accordance with the provisions of 37 C.F.R. § 1.97, Applicants hereby make of record the documents listed on the accompanying Form PTO-1449 (1 sheet) for consideration by the Examiner in connection with the examination of the above-identified patent application.

Pursuant to 37 C.F.R. § 1.98 (a), the foreign patent references listed on sheet 1 of the attached Form PTO-1449 are enclosed. If it is determined that any of the listed references are not of record in the parent application or presently enclosed, the Examiner is requested to contact the undersigned so that a copy can be forwarded.

It is respectfully requested that the references cited in the accompanying Form PTO-1449 (1 sheet) be considered and made of record.

This Information Disclosure Statement is filed under 37 C.F.R. § 1.97 (b), before the mailing of a first Office Action on the merits. Accordingly, no fee is believed due. In the event any additional fee is due or any overpayment made in connection with the filing of this Information Disclosure Statement, the Commissioner is hereby authorized to charge said deficiency or credit overpayment to our Deposit Account No. 50-0552.

Respectfully submitted,
DAVIDSON, DAVIDSON & KAPPEL, LLC

By 
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FORM PTO-1449 (REV. 7-80)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTY. DOCKET NO.: 200.1133CON		SERIAL NO.: 10/689,866								
LIST OF PRIOR ART CITED BY APPLICANT (Use several sheets if necessary)				APPLICANT(S): Benjamin OSHLACK et al.										
				FILING DATE: October 21, 2003		GROUP: 1614								
U.S. PATENT DOCUMENTS														
*EXAMINER INITIAL		DOCUMENT NUMBER							DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE	
	AA	4	5	8	7	1	1	8	05/06/1986	Hsiao	424	459		
	AB													
	AC													
	AD													
	AE													
	AF													
	AG													
FOREIGN PATENT DOCUMENTS														
		DOCUMENT NUMBER							DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
													YES	NO
	AH	04	0	5	2	3	4	6	06/24/04	WO (A1)	A61K	9/62		
	AI	0	5	4	8	4	4	8	09/06/2000	EP (B1)	A61K	9/50	abstract	
	AJ													
	AK													
	AL													
OTHER PRIOR ART (Including Author, Title, Date, Pertinent Pages, Etc.)														
	AM													
	AN													
	AO													
	AP													
	AQ													
	AR													
	AS													
EXAMINER										DATE CONSIDERED				
*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.														